

FORWARDING ADDRESSES & DAMAGE -- ROWAN CONDOS UNIT # _____

Each tenant should fill out forwarding address information (if missing, the refund check will be mailed to this apartment address in hopes that the post office will forward it). Each tenant should state which bedroom is his and which damage in common areas he is responsible for. All Tenants should **sign** to acknowledge that the damages are correctly apportioned & address is correct. Any damages not listed will be divided equally and the deposit returned in equal portions. **TURN FORM IN WITH YOUR KEYS.**

East Corner Bedroom: Tenant name: _____

Forwarding address _____

City _____ State _____ Zip _____ Tel. _____

I am solely responsible for the following damages to common areas: _____

West Corner Bedroom: Tenant name: _____

Forwarding address _____

City _____ State _____ Zip _____ Tel. _____

I am solely responsible for the following damages to common areas: _____

_____ Bedroom: Tenant name: _____

Forwarding address _____

City _____ State _____ Zip _____ Tel. _____

I am solely responsible for the following damages to common areas: _____

_____ Bedroom: Tenant name: _____

Forwarding address _____

City _____ State _____ Zip _____ Tel. _____

I am solely responsible for the following damages to common areas: _____

SIGNED:

_____ . _____